



RETIREMENT TOOLKIT

YOUR INCOME PLANNING BOOKLET





Name_____

Date_____

- Use this simple worksheet to get started on your retirement income plan.
- Your advisor can then help you create a realistic retirement income plan to help ensure that your income lasts as long as your retirement.
- Upon completion, scan and email to info@pillarcentral.com, fax to 559.436.0205.

ESTIMATE YOUR ANTICIPATED RETIREMENT EXPENSES

Envision your life in retirement and think about the expenses you will — or might — incur. Taking into account your lifestyle and goals, identify which expenses are essential (must have) to differentiate them from those that are discretionary (nice to have).

Record your estimated monthly retirement expenses and indicate whether it is essential and if it will vary.		AMOUNT (\$)		IS IT ESSENTIAL?	WILL IT VARY?	NOTES
		YOU	SPOUSE	YES	YES	
Housing	Homeowner's Insurance	\$	\$	☐	☐	
	Household Improvements & Maintenance	\$	\$	☐	☐	
	Mortgage	\$	\$	☐	☐	
	Property Tax	\$	\$	☐	☐	
	Property Tax	\$	\$	☐	☐	
	Rent/Condo Fees	\$	\$	☐	☐	
	Other	\$	\$	☐	☐	
Utilities	Electric	\$	\$	☐	☐	
	Oil/Gas	\$	\$	☐	☐	
	Phone/Cable/Internet Fees	\$	\$	☐	☐	
	Water/ Sewer	\$	\$	☐	☐	
	Other	\$	\$	☐	☐	
Personal	Clothing	\$	\$	☐	☐	
	Groceries	\$	\$	☐	☐	
	Laundry/Dry Cleaning	\$	\$	☐	☐	
	Personal Care (health & beauty)	\$	\$	☐	☐	
	Other	\$	\$	☐	☐	
Health Care & Insurance	Dental, Vision, Hearing	\$	\$	☐	☐	
	Medical Insurance Medicare	\$	\$	☐	☐	
	Premiums & Expenses Medicare	\$	\$	☐	☐	
	Supplemental Premiums	\$	\$	☐	☐	
	Other (e.g., Out-of-Pocket Pharmacy Costs)	\$	\$	☐	☐	
	Long-Term Care Insurance	\$	\$	☐	☐	
	Premiums Disability Insurance	\$	\$	☐	☐	
	Life Insurance Premiums	\$	\$	☐	☐	
SUBTOTAL		\$	\$			

ESTIMATE YOUR ANTICIPATED RETIREMENT EXPENSES (cont.)

Record your estimated monthly retirement expenses and indicate whether it is essential and if it will vary.		AMOUNT		IS IT ESSENTIAL?	WILL IT VARY?	NOTES
		YOU	SPOUSE	YES	YES	
Family Care	Support of Children/Grandchildren	\$	\$	☐	☐	
	Support of Parents	\$	\$	☐	☐	
	Other Obligations	\$	\$	☐	☐	
Routine Transportation	Auto Loan/Lease Payments	\$	\$	☐	☐	
	Excise Tax/Registration Fees	\$	\$	☐	☐	
	Gasoline	\$	\$	☐	☐	
	Auto Insurance	\$	\$	☐	☐	
	Routine Maintenance	\$	\$	☐	☐	
	Other Commuting Expenses	\$	\$	☐	☐	
Recreation	Club Memberships	\$	\$	☐	☐	
	Hobbies	\$	\$	☐	☐	
	Travel & Vacations	\$	\$	☐	☐	
	Other	\$	\$	☐	☐	
Entertainment	Dining Out	\$	\$	☐	☐	
	Movies/Theater/Sporting Events	\$	\$	☐	☐	
	Other	\$	\$	☐	☐	
Charitable Donations And Gifts	Charitable Donations	\$	\$	☐	☐	
	Gifts	\$	\$	☐	☐	
Custom Expenses	Expense #1	\$	\$	☐	☐	
	Expense #2	\$	\$	☐	☐	
	Expense #3	\$	\$	☐	☐	
	Expense #4	\$	\$	☐	☐	
	Expense #5	\$	\$	☐	☐	
	Expense #6	\$	\$	☐	☐	
SUBTOTAL		\$	\$			
SUBTOTAL From Page 3		\$	\$			
TOTAL		\$	\$			

TAKE INVENTORY OF INCOME AND ASSETS

List the income sources you will use to fund your retirement, as well as any assets and accounts you may have that could be converted into income.

INCOME	DESCRIPTION OF SOURCE OF INCOME	MONTHLY INCOME YOU	SPOUSE
Annual Income		\$	\$
Social Security		\$	\$
Pension Plans		\$	\$
Annuity Income		\$	\$
Rental Income		\$	\$
Other		\$	\$
		TOTAL	\$

ASSETS	DESCRIPTION OF ASSETS	INVESTED ASSETS YOU	SPOUSE
Employer-Sponsored Savings		\$	\$
Traditional IRAs		\$	\$
Taxable Mutual Funds		\$	\$
Tax-Deferred Annuities		\$	\$
Savings Accounts		\$	\$
Other		\$	\$
		TOTAL	\$

OTHER INCOME	DESCRIPTION OF INCOME	OTHER INCOME YOU	SPOUSE
Real Estate		\$	\$
Inheritance		\$	\$
Stock Options		\$	\$
Other		\$	\$
		TOTAL	\$

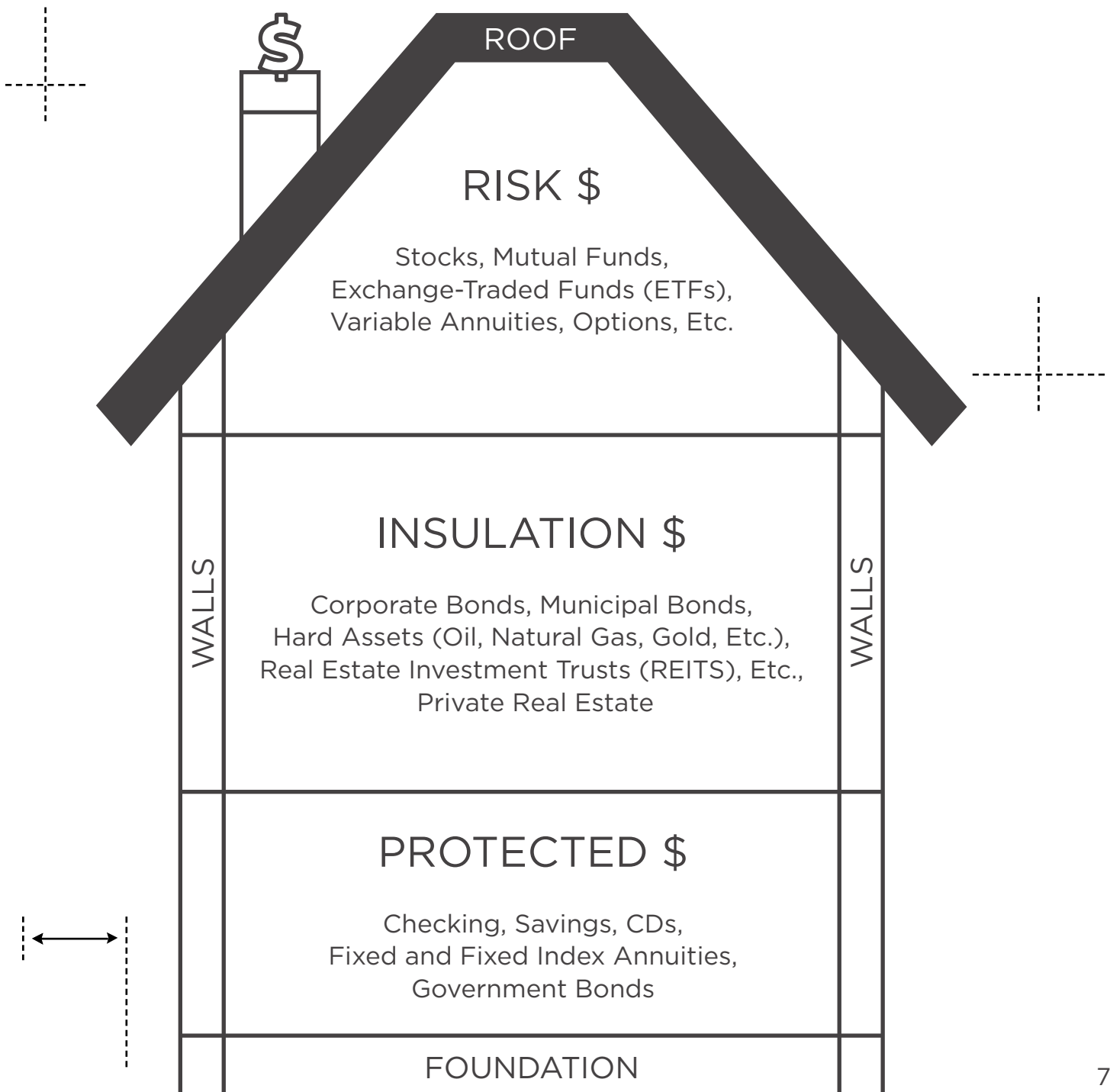
The asset values provided herein have been obtained from the above named individual(s) or statements provided by the client.
Osaic Wealth, Inc. has not independently verified the values.

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YOUR FISCAL HOUSE

Building a reliable retirement income plan is a lot like building a home: Its strength depends on how well its components — the roof, walls and foundation — work together as one.

Here are the parts that generally go into each section of your fiscal house:





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